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VIA FACSIMILE NO.: 703/872-9306PATENT  
SIE04 P-106A

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Confirmation No. : 9320  
Group : 3651  
Serial No. : 10/764,962  
Applicant : Anderson et al.  
Filing Date : January 26, 2004  
Examiner : Richard Ridley  
For : INTEGRATED CONVEYOR BED  
Atty Docket : SIE04 P-106A  
Customer No. : 28101

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

CERTIFICATE OF FACSIMILE

I hereby certify that the following papers are being facsimile transmitted to the Patent and Trademark Office on the date shown below:

1. Certificate of Facsimile (1 page)
2. RESPONSE to Office Action Dated August 17, 2004 (9 pages)
3. CLAIMS AS AMENDED Fee Calculation Sheet (1 page, in duplicate)
4. PETITION AND FEE for a Two-Month Extension of Time (1 page, in duplicate)

YOU SHOULD RECEIVE A TOTAL OF FOURTEEN (14) PAGES.

Dated: November 17, 2004.

FSB:wen  
SIE04 P-106A

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**RESPONSE TO RESTRICTION REQUIREMENT**

This is in response to the Office Action mailed August 17, 2004, in the above-identified application. Enclosed is a petition and fee for a two-month extension of time in order to extend the Response due date to November 17, 2004.

Amendments to the claims are reflected in a listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Anderson et al.  
 Serial No. : 10/764,962  
 Filed : January 26, 2004  
 For : INTEGRATED CONVEYOR BED

Group Art Unit : 3651  
 Examiner : Richard Ridley

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below:

CLAIMS AS AMENDED


	Col. 1		Col. 2	Col. 3	Small Entity		Other Than a Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	26	Minus	69	= 0	x \$9	\$	x \$ 18	\$ -0-
Independent Claims	2	Minus	5	= 0	x \$43	\$	x \$ 86	\$ -0-
First Presentation of Multiple Dependent Claims \$145						\$	x \$290	\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$		\$ -0-

1. ☐ Small entity status of this application 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.
2. ☒ No additional fee is required.
3. ☐ A check in the amount of \$\_\_\_ is attached.
4. ☒ Please charge any additional fees required or credit overpayment to  
Deposit Account No. 22-0190. A duplicate of this sheet is enclosed.

VAN DYKE, GARDNER, LINN & BURKHART, LLP

Date: November 17, 2004

By:

  
 Frederick S. Burkhardt  
 Registration No. 29 288  
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FSB:wen  
 SIE04 P-106A